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APPLICANTS
 Randolph Kerschbaumer, Vienna, AUSTRIA;
 Friedrich Scheifflinger, Vienna, AUSTRIA;

**** CONTINUING DATA *******
none *8/11/06*

**** FOREIGN APPLICATIONS *******
none *8/11/06*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AUSTRIA	SHEETS DRAWING 11	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

ADDRESS
44183

TITLE
Factor IXa specific antibodies displaying factor VIIIa like activity

FILING FEE RECEIVED 1026	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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